

The Facts about Medicare's New Preventive Benefits

MEDICARE MODERNIZATION ACT

It makes sense to prevent diseases, not just treat them. Eat well, stay active, stop smoking, and get the preventive services you need. Medicare covers many different preventive benefits such as screening tests for many cancers, flu vaccine and other shots, and a variety of other tests.

What new preventive benefits does Medicare cover?

Starting January 1, 2005, Medicare will cover these three new preventive benefits:

- One-time "Welcome to Medicare" physical exam for people new to Medicare
- Cardiovascular screening
- Diabetes screening

Note: These new preventive services are covered no matter what kind of Medicare health plan you have. However, the amount you pay for these services varies depending on the type of health plan. This fact sheet explains the way these preventive services are covered if you have Part B under the Original Medicare Plan (sometimes called fee-for-service). If you have another type of Medicare health plan, call the plan for specific information.

What is the new "Welcome to Medicare" physical exam?

If your Medicare Part B coverage begins on or after January 1, 2005, Medicare will cover a one-time preventive physical exam within the first six months that you have Part B. The exam will include a review of your health; education and counseling about the preventive services you need, like certain screenings and shots; and referrals for other care. The "Welcome to Medicare" physical exam is a great way to get up-to-date on important screenings and shots, and to talk with your doctor about your family history and how to stay healthy.

What should I expect during my exam?

During the exam, your doctor will record your medical history and check your blood pressure, weight and height. Your doctor will also give you or order an Electrocardiogram (EKG) and a vision test. Your doctor will check to make sure that you are up-to-date with your shots. Depending on your general health and medical history, further tests may be ordered, if necessary. Your doctor will also give you advice to help you prevent disease, improve your health and stay well. You will also get a written plan (such as a checklist) when you leave letting you know which screenings and other preventive services you should get.



What should I bring with me to the exam?

When you go to your "Welcome to Medicare" physical exam, bring your

- medical records, including immunization records (if you are seeing a new doctor). Call your old doctor to get copies of your medical records.
- family health history—try to learn as much as you can about your family's health history before your appointment. Any information you can give your doctor can help determine if you are at risk for certain diseases.
- list of prescription and over-the-counter drugs that you currently take, how often you take them, and why.

How much does the exam cost?

You pay 20% of the Medicare-approved amount after you meet the yearly Part B deductible (\$110 for 2005). Since this may be your first Medicare-covered service, you may meet your entire Part B deductible at this visit.

Remember!

Medicare will only cover your "Welcome to Medicare" physical exam if you get it within the first six months you have Part B.

Note: If your doctor thinks this six-month period has passed, he or she should give you a notice that says Medicare probably won't pay for this service. If you still want to get the service, you will be asked to sign an agreement that you will pay for the service yourself if Medicare doesn't pay for it. This is called an Advance Beneficiary Notice.

What is the new Cardiovascular Screening?

Medicare covers cardiovascular screenings that check your cholesterol and other blood fat (lipid) levels. High levels of cholesterol can increase your risk for heart disease and stroke. These screenings will tell you if you have high cholesterol. You might be able to make lifestyle changes (like changing your diet and exercising more often) to lower your cholesterol and stay healthy. Medicare will cover these tests every five years and you pay nothing.

What is the new Diabetes Screening?

Diabetes is a medical condition in which your body doesn't make enough insulin or has a reduced response to insulin. Diabetes causes your blood sugar to be too high because insulin is needed to use sugar properly. For people with Medicare at risk for getting diabetes, Medicare covers a screening blood sugar test to check for diabetes. You are considered at risk if you have any of the following: high blood pressure, dyslipidemia (history of abnormal cholesterol and triglyceride levels), obesity, or a history of high blood sugar. Other risk factors may also qualify you for this test. Based on the test results, you may be eligible for up to two screenings each year. You pay nothing for these tests. Medicare also covers certain supplies and self-management training to control and treat diabetes.

For more information about these and other Medicare preventive services, get a free copy of the *Guide to Medicare's Preventive Services* (CMS Pub. No. 10110) at www.medicare.gov on the web. Or, call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.